

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. USNM-12020	
b. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Kirby Exploration Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1745, Houston, Texas 77001		8. FARM OR LEASE NAME Kirby Gallegos	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface 790' FSL & 790' FWL At proposed prod. zone Same		9. WELL NO. 2	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 20 miles south of Farmington, New Mexico		10. FIELD AND POOL, OR WILDCAT WAW Pictured Cliff	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any) 790'		11. SEC., T., R. M., OR BLK. AND SURVEY OR AREA Sec 26, T27N, R13W	
16. NO. OF ACRES IN LEASE 640		12. COUNTY OR PARISH San Juan	
17. NO. OF ACRES ASSIGNED TO THIS WELL 160		13. STATE New Mexico	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 3400		20. ROTARY OR CABLE TOOLS Rotary	
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 6075 GL		22. APPROX. DATE WORK WILL START* 12-1-76	

## 23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT

Change name from Gallegos #2 to Kirby Gallegos #2 as per request by  
New Mexico Oil Conservation Commission.

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U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED <u>William T. Jones</u> TITLE <u>Agent</u>		DATE <u>11-22-76</u>	
(This space for Federal or State office use)			
PERMIT NO. _____		APPROVAL DATE _____	
APPROVED BY _____		TITLE _____	
CONDITIONS OF APPROVAL, IF ANY:			